

RETIREMENT SYSTEM FINANCIAL DISCLOSURE REPORT

Pursuant to LSA-R.S. 42:1114, each person who has or is seeking to obtain a contractual or other business or financial relationship with a state or municipal public retirement system shall file with the Board of Ethics a financial disclosure report semiannually if the person has made expenditures of five hundred dollars or more in a calendar year. Reported disclosing expenditures for retirement officials must be filed by August 15th covering January 1 through June 30 of the calendar year and by February 15th covering January 1 through December 31 of the calendar year. Although there is no registration requirement under R.S. 42:1114-2, you may be required to register and report under LSA-R.S. 49:71 or add.

Reports may be mailed or delivered to: Board of Ethics, 2415 Canal Dr., 3rd Floor, Baton Rouge, LA 70804

OR

Facsimile to: (225)763-8387 or (225)763-8730

REPORT COVERING:

G JANUARY 1 through JUNE 30, 2007 - DUE BY AUGUST 15

G JANUARY 1 through DECEMBER 31, _____ - DUE BY FEBRUARY 15

1. Name:

Garuti

Daniel

J

Last

First

MI

2. Business

Address: 1 Financial Ctr

Boston

MA

02111

Street and No.

City

State

Zip

Mailing Address: Same

3. Business Phone: 617-482-2450

Area Code and Telephone Number

4. Employer: Loomis, Sayles & Company L.P.

5. Employer's address: 1 Financial Ctr

Boston

MA

02111

Street and No.

City

State

Zip

6. Did you make an expenditure exceeding \$50 on one occasion for a retirement system official:

From January 1 through June 30?

Yes ☐

No ☒

From July 1 through December 31?

Yes ☐

No ☐

NA ☐

If the answer to either question in Number 6 above is YES, complete Schedule A and attach.

7. Did you make expenditures exceeding the sum of \$250 for a retirement system official:

From January 1 through June 30?

Yes ☐

No ☒

From July 1 through December 31?

Yes ☐

No ☐

NA ☐

If the answer to either question in Number 7 above is YES, complete Schedule A and attach.

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ONLY**

Postmark Date: _____

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OF REVENUE

8. PROVIDE BELOW (a) the name of the state or statewide public retirement system; (b) the aggregate total of all expenditures attributable to the retirement system made during the January 1 - June 30 reporting period; (c) the aggregate total of all expenditures attributable to the retirement system made during the July 1 - December 31 reporting period when applicable; (d) the aggregate total of all expenditures made in a calendar year attributable to the retirement system.

- 1) a. Name of Retirement System: Municipal Employees' Retirement System
- b. Total of all expenditures made January 1 through June 30: \$ 57.75
- c. Total of all expenditures made July 1 through December 31: \$ _____
(When applicable)
- d. Total of all expenditures made during the calendar year: \$ 57.75
- 2) a. Name of Retirement System: _____
- b. Total of all expenditures made January 1 through June 30: \$ _____
- c. Total of all expenditures made July 1 through December 31: \$ _____
(When applicable)
- d. Total of all expenditures made during the calendar year: \$ _____
- 3) a. Name of Retirement System: _____
- b. Total of all expenditures made January 1 through June 30: \$ _____
- c. Total of all expenditures made July 1 through December 31: \$ _____
(When applicable)
- d. Total of all expenditures made during the calendar year: \$ _____

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; that all reportable expenditures have been included herein; and that no information required by LSA-R.S. 42:1114.2 has been deliberately omitted.


Signature of Filer